

PUPIL - WEEKLY SELF-MONITORING RECORD FORM

STUDENT NAME _____ WEEK OF _____

DAYS	BEHAVIOR RATING	ON-TASK ACADEMICS	WORK TURNED IN	TEACHER FEEDBACK
	GREAT FAIR POOR	GREAT FAIR POOR	YES NO	
MONDAY	1 2 3 4 5	1 2 3 4 5		
TUESDAY	1 2 3 4 5	1 2 3 4 5		
WEDNESDAY	1 2 3 4 5	1 2 3 4 5		
THURSDAY	1 2 3 4 5	1 2 3 4 5		
FRIDAY	1 2 3 4 5	1 2 3 4 5		
		MY HOMEWORK	COMPLETED YES NO	PARENT FEEDBACK
SATURDAY	1 2 3 4 5	1 2 3 4 5		
SUNDAY	1 2 3 4 5	1 2 3 4 5		